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UTILITY PATENT APPLICATION **TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

	Mail Stop Patent Application	()		Ξ		
Express Mail Label No.	EL964302564US	147	<u> </u>			
Title	POLYAXIAL PEDICLE SCREW S	U .	ر ا			
First Inventor	Arthit Sitiso	S. F	က် -			
Attorney Docket No.	MICRON-43919	ρ.,		\		
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APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450				
1.	7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. Paper c. Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS 9. Assignment Papers (cover sheet & document(s)) 10. 37 CFR 3.73(b) Statement Power of (when there is an assignee) 11. English Translation Document (if applicable) 12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations 13. Preliminary Amendment 14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. Other:				
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:					
Continuation Divisional Continuation-in-part (CIP) of prior application No.: Prior application information: Examiner For CONTINUATION OR DIVISIONAL APPS only; The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS					
Customer Number: 26252 OR Correspondence address below					
Name					
Address					
City	State Zip Code				
	elephone Fax				
Name (Print/Type) Aaron T. Berrewman Registration No. (Attorney/Agent) 42,348 Signature Date 02/04/2004					

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Compl te if Known

FE	ETR	RAN	SMI	TTAL
	for	FY	200	4

Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

Name (Print/Type)

Signature

Aaron T. Borrowman

(\$) 412.00

spond to a collection of information unless it displays a valid OMB control number.				
Compl te if Known				
Application Number				
Filing Date	Concurrently			
First Named Inventor	Arthit Sitiso			
Examiner Name				
Art Unit				
Attorney Docket No.	MICRON-43919			

Telephone 818-347-7900

02/04/2004

METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)				
Check Credit card Money Other None						
Deposit Account:						
Deposit Account		Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
Number	1051	130	2051	65	Surcharge - late filing fee or oath	
Deposit Account Name	1052	50	2052		Surcharge - late provisional filing fee or cover sheet	
The Director is authorized to: (check all that apply)	1053	130	1053	130	Non-English specification	
Charge fee(s) indicated below Credit any overpayments	1812 2,	,520	1812 2	2,520	For filing a request for ex parte reexamination	
Charge any additional fee(s) or any underpayment of fee(s)		920*	1804		Requesting publication of SIR prior to Examiner action	
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.		,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
FEE CALCULATION		110	2251	55	Extension for reply within first month	
1. BASIC FILING FEE	1252	420	2252	210	Extension for reply within second month	
Large Entity Small Entity	1253	950	2253	475	Extension for reply within third month	
Fee Fee Fee Fee Paid Code (\$) Code (\$)	1254 1,	,480	2254	740	Extension for reply within fourth month	
1001 770 2001 205 Litibu filing for	1255 2,	,010	2255	1,005	Extension for reply within fifth month	L
1002 340 2002 170 Design filing fee 385.00	1401	330	2401	165	Notice of Appeal	
1003 530 2003 265 Plant filing fee	1402	330	2402	165	Filing a brief in support of an appeal	
1004 770 2004 385 Reissue filing fee	1403	290	2403	145	Request for oral hearing	
1005 160 2005 80 Provisional filing fee	1451 1,	,510	1451	1,510	Petition to institute a public use proceeding	
SUBTOTAL (1) (\$) 385.00	1452	110	2452	55	Petition to revive - unavoidable	
		,330	2453	665	Petition to revive - unintentional	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501 1,	,330	2501	665	Utility issue fee (or reissue)	
Extra Claims below Fee Paid	1502	480	2502	240	Design issue fee	
Total Claims 23 -20** = 3 X 9 = 27	1503	640	2503	320	Plant issue fee	
Claims Multiple Dependent	1460	130	1460	130	Petitions to the Commissioner	
· · · · · · · · · · · · · · · · · · ·	1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
Large Entity Small Entity Fee Fee Fee Fee Fee Description	1806	180	1806		Submission of Information Disclosure Stmt	
Code (\$) Code (\$) 1202 18 2202 9 Claims in excess of 20	8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1201 86 2201 43 Independent claims in excess of 3	1809	770	2809	385	Filing a submission after final rejection (37 CFR 1.129(a))	
1203 290 2203 145 Multiple dependent claim, if not paid	1810	770	2810	385	For each additional invention to be examined (37 CFR 1.129(b))	
1204 86 2204 43 ** Reissue independent claims over original patent	1801	770	2801	385	Request for Continued Examination (RCE)	
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802	900	1802	900	. ,	
	Other fe	e (sp	ecify) _			
**or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if						
SUBMITTED BY (Complete (if applicable))						

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Registration No.

(Attomey/Agent)